PONIES ASSOCIATION (UK) ENTRY FORM

ALL SECTIONS OF THE ENTRY FORM MUST BE COMPLETED OTHERWISE ENTRY FORMS WILL BE RETURNED

Please return to: Ponies (UK), Building 141, Alconbury Weald, Huntingdon, Cambridgeshire, PE28 4WX

CLASS NO.	HORSE/PONY NAME & P(UK) REG. NO.	BREEDER/BREED	BREEDING	С	OLOUR/SEX/HEIGHT/ YEAR OF BIRTH		R/HANDLER NAME K) REG NO	QUALIFYING SHOW & DATE	CLASS ENTRY FEE	
		Breeder	Sire	Colou	r Height (cms)	Ì				
		Breed	Dam	Sex	Year of Birth					
		Breeder	Sire	Colou	r Height (cms)					
		Breed	Dam	Sex	Year of Birth					
		Breeder	Sire	Colou	r Height (cms)					
		Breed	Dam	Sex	Year of Birth					
		Breeder	Sire	Colou	r Height (cms)					
		Breed	Dam	Sex	Year of Birth					
<u>Please Note:</u> Entries must be accompanied by all fees. <u>FEES ARE NOT REFUNDABLE</u> . Cheques s <u>ASSOCIATION (UK)</u> . Entry/Stabling Forms will only be accepted by fax with completed credit/debit					it card details. Stable bookings are			MEDICAL/ VETERINARY FEE £8.00		
subject to availability. No nomination or substitution entries are accepted. I testify the exhibits to be the for the classes stated on the form. The Owner/Exhibitor/Producer undertakes to abide by the regulation of the classes stated on the form.					ations and conditions of the show		G	RAND TOTAL		
By signing this form I agree to having read and understood all the Rules & Regulations of the Show. SIGNATURE:							STABLING/ELECTRICITY BOOKING FORMS MUST BE SENT DIRECTLY TO BURY FARM EQUESTRIAN CENTRE			
OWNERS ADULT MEMBERSHIP NUMBER					\Box Please find enclosed a cheque/postal order for £					
MR/MRS/MISS/MS/OTHER INITIALSURNAME					Please charge my: debit card credit card (inc. £2 surcharge) for £					
ADDRESS					Start Date/ Expiry Date/ Security Number					
					L					
POSTCODE DAYTIME TEL NO					Cardholders name and address (if different to above)					
EMAIL ADDRESS										
ALTERNATIVE POSTAL ADDRESS										
					Signed	Date				
					FOR OFFICE USE ONLY:					